



**Criminal History Background Check Symposium  
For Non-Criminal Justice Users**

**ATTENDEE REGISTRATION FORM**

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**ST. LOUIS - Thursday, July 10, 2008 (Deadline July 3, 2008)**

**City of St. Peters**

**City Hall - Room AB**

**One St. Peters Centre Boulevard**

**St. Peters, MO 63376**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Title: \_\_\_\_\_

Agency Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

**REGISTRATION FEE IS \$20.00 PER PERSON**

Please make check or money order payable to:  
**MISSOURI STATE TROOPERS ASSOCIATION**

REGISTRATION FORM AND FEE(S) MUST BE RECEIVED PRIOR TO DEADLINE LISTED ABOVE.

**PLEASE MAIL FORM(S) WITH FEE(S) TO:**

**Missouri State Highway Patrol  
Criminal Records and Identification Division  
Criminal History Background Check Symposium  
Post Office Box 9500  
Jefferson City, MO 65102-9500**

**PHONE: 573-526-6345  
EMAIL: [movechs@mshp.dps.mo.gov](mailto:movechs@mshp.dps.mo.gov)  
FAX: 573-526-9925**

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